

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF NEW YORK**

COVER SHEET FOR SCHEDULES, STATEMENTS, LISTS AND/OR AMENDMENTS

Case Name: Menorah Campus Inc. Case No. 25-10127-CLB Chapter: 11

A. IDENTIFY TYPE OF DOCUMENT BEING FILED: (Select either 1, 2 or 3)

- ☒ 1 - Amendment to Previously Filed Document (Go to Sec. B)
- ☐ 2 - Schedule/Statement Not Previously Filed (Go to Sec. B)
- ☐ 3 - Schedule of Post-Petition Debts (result of conversion-no fee due) (Go to Sec. D)

B. SUMMARIZE SPECIFICS OF DOCUMENT BEING FILED BY CHECKING APPLICABLE DATA ELEMENTS:

- ☐ Official Form 101: ☐ Part 1 ☐ Part 2 ☐ Part 3 ☐ Part 4 ☐ Part 5 ☐ Part 6 ☐ Part 7
- ☐ Official Form 106Sum: Summary of Your Assets and Liabilities and Certain Statistical Information
- ☐ Official Form 106Dec: Declaration About an Individual Debtor's Schedules
- ☐ Official Form 107/207: Statement of Financial Affairs
- ☐ Official Form 108: Statement of Intention for Individuals Filing Under Chapter 7
- ☐ Schedules: ☐ Schedule A/B ☐ Schedule C ☐ Schedule D ☐ Schedule E/F
☐ Schedule G ☐ Schedule H ☐ Schedule I ☐ Schedule J ☐ Schedule J-2
- ☐ Official Form 113: Chapter 13 Plan
- ☒ Official Form 201: Question #: 2, 7 ☐ Official Form 201A (Ch 11 Non-Individuals)
- ☐ Form 2030: Disclosure of Compensation of Attorney for Debtor
- ☐ Other: _____

**FOR CHANGES AFFECTING SCHEDULES D, E/F, THE LIST OF CREDITORS, MATRIX OR MAILING LIST,
PROCEED TO SECTION 'C' OF THIS FORM. OTHERWISE, PROCEED TO SECTION 'D'.**

C. CREDITOR/SCHEDULE INFORMATION: (Select either 1, 2 or 3)

- ☒ 1 - No Creditors are being added or deleted.
- ☐ 2 - Creditors are being added or deleted by this amendment/schedule, AND
- ☐ \$34.00 fee is attached
- ☐ A matrix in the format prescribed by the Clerk with the complete names and addresses of the parties added is attached.
Do not repeat creditor information from a previously filed matrix. The Clerk's office will not delete creditors unless a motion to delete creditors is granted.
- ☐ 3 - Schedules of creditors (Schedules D, E/F), list of creditors, matrix or mailing list is being amended for purposes other than adding or deleting creditors.
- ☐ \$34.00 fee is attached [e.g. changing amount of a debt or classification of a debt].
- ☐ The fee does not apply [e.g. change of address of a creditor or change of attorney].

D. CERTIFICATION OF SERVICE, ATTORNEY'S DECLARATION AND DEBTOR'S UNSWORN DECLARATION

CERTIFICATION OF SERVICE: Attach an "Affidavit of Service" listing each party served with a copy of the referenced document(s), this cover sheet and a copy of the §341 Meeting Notice (if applicable). Be sure to include the U.S. Trustee and the Case Trustee.

DECLARATION OF ATTORNEY [Attorney OR Debtor, if pro se, must sign]: I declare that the above information contained on this cover sheet may be relied upon by the Clerk of Court as a complete and accurate summary of the information contained in the documents attached.

Dated: 2/15/25 Signature: _____

DECLARATION OF DEBTOR(S): [Required if declaration is not completed on the document(s) itself or by separate instrument.]

I declare under penalty of perjury that I have read this cover sheet and the attached schedules, lists, statements, etc., consisting of _____ sheets, numbered 1 through _____, and that they are true and correct to the best of my knowledge, information and belief.

Dated: _____ Signature: _____ (debtor)

Dated: _____ Signature: _____ (joint debtor, if any)

Fill in this information to identify your case:

United States Bankruptcy Court for the:

WESTERN DISTRICT OF NEW YORK

Case number (if known) 25-10127-CLB

Chapter 11

☒ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

06/24

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name MENORAH CAMPUS, INC.

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and doing business as names

DBA The Harry and Jeanette Weinberg Campus

3. Debtor's federal Employer Identification Number (EIN) 16-1376699

4. Debtor's address

Principal place of business

Mailing address, if different from principal place of business

2700 NORTH FOREST ROAD
Getzville, NY 14068

Number, Street, City, State & ZIP Code

P.O. Box, Number, Street, City, State & ZIP Code

Erle
County

Location of principal assets, if different from principal place of business

Number, Street, City, State & ZIP Code

5. Debtor's website (URL) _____

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

☐ Partnership (excluding LLP)

☐ Other. Specify: _____

7. Describe debtor's business A. Check one:

- ☒ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Railroad (as defined in 11 U.S.C. § 101(44))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
☐ None of the above

B. Check all that apply

- ☒ Tax-exempt entity (as described in 26 U.S.C. § 501)
☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

6231

8. Under which chapter of the Bankruptcy Code is the debtor filing? Check one:

- ☐ Chapter 7
☐ Chapter 9

☒ Chapter 11. Check all that apply:

- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725 (amount subject to adjustment on 4/01/25 and every 3 years after that).
☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and it chooses to proceed under Subchapter V of Chapter 11.
☐ A plan is being filed with this petition.
☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11 (Official Form 201A) with this form.
☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

- ☒ No.
☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

- ☐ No.
☒ Yes.

Rosa Coplon Jewish Home and Infirmary - WDNY
Menorah Campus Adult Home Inc. - WDNY
Menorah Campus Independent Senior Apartments, Inc. - WDNY

Debtor **MENORAH CAMPUS, INC. D/B/A THE HARRY AND**

Case number (if known) _____

Name

List all cases. If more than 1,
attach a separate listDebtor
District

When

Relationship

Case number, if known

**11. Why is the case filed in
this district?**

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

**12. Does the debtor own or
have possession of any
real property or personal
property that needs
immediate attention?**☒ No☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.**Why does the property need immediate attention? (Check all that apply.)**

- ☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.
What is the hazard? _____
- ☐ It needs to be physically secured or protected from the weather.
- ☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).
- ☐ Other _____

Where is the property? _____

Number, Street, City, State & ZIP Code

Is the property insured?☐ No☐ Yes. Insurance agency _____

Contact name _____

Phone _____

Statistical and administrative information**13. Debtor's estimation of
available funds**

Check one:

- ☐ Funds will be available for distribution to unsecured creditors.
- ☒ After any administrative expenses are paid, no funds will be available to unsecured creditors.

**14. Estimated number of
creditors**

- | | | |
|---|--|--|
| <input type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input type="checkbox"/> 50-99 | <input type="checkbox"/> 5001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input checked="" type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |

15. Estimated Assets

- | | | |
|--|---|--|
| <input type="checkbox"/> \$0 - \$50,000 | <input type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion |
| <input type="checkbox"/> \$50,001 - \$100,000 | <input checked="" type="checkbox"/> \$10,000,001 - \$50 million | <input type="checkbox"/> \$1,000,000,001 - \$10 billion |
| <input type="checkbox"/> \$100,001 - \$500,000 | <input type="checkbox"/> \$50,000,001 - \$100 million | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> More than \$50 billion |

16. Estimated liabilities

- | | | |
|--|---|--|
| <input type="checkbox"/> \$0 - \$50,000 | <input type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion |
| <input type="checkbox"/> \$50,001 - \$100,000 | <input checked="" type="checkbox"/> \$10,000,001 - \$50 million | <input type="checkbox"/> \$1,000,000,001 - \$10 billion |
| <input type="checkbox"/> \$100,001 - \$500,000 | <input type="checkbox"/> \$50,000,001 - \$100 million | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> More than \$50 billion |

Debtor **MENORAH CAMPUS, INC. D/B/A THE HARRY AND**
Name

Case number (if known)

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **February 15, 2025**
MM / DD / YYYY

X /s/ Robert T Mayer
Signature of authorized representative of debtor

Title **Chief Executive Officer**

Robert T Mayer
Printed name

18. Signature of attorney

X /s/ Kevin R. Lelonek
Signature of attorney for debtor

Date **February 15, 2025**
MM / DD / YYYY

Kevin R. Lelonek
Printed name

Gross Shuman PC
Firm name

465 Main St Suite 600
Buffalo, NY 14203
Number, Street, City, State & ZIP Code

Contact phone **(716) 854-4300**

Email address **klelonek@gross-shuman.com**

NY 5489141
Bar number and State